



State of New Hampshire 2005 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2005

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 03/01/2005

Business ID: 316905

William M. Gardner

Secretary of State

HAVEN HOMES, INC.

ROUTE 150, PO BOX 178

BEECH CREEK, PA 16822

ADDRESS OF PRINCIPAL OFFICE:

ROUTE 150, PO BOX 178

BEECH CREEK, PA 16822

REGISTERED AGENT AND OFFICE:

G WELLS ANDERSON

14 CENTRE ST

CONCORD, NH 03302

ENTITY TYPE: CORPORATION

BUSINESS ID: 316905

STATE OF DOMICILE: DELAWARE

FEDERAL ID: 251699921

DELIVER AND ERECT MODULAR HOMES FROM OUR FACTORY IN
PENNSYLVANIA

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐ The new mailing address

☐ The new principal office address 554 EAGLE VALLEY RD., BEECH CREEK, PA 16822

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE OFFICER BELOW)

NAME DAVID C. BALLARD

STREET MOGISH LANE

CITY/STATE/ZIP MILL HALL, PA 17751

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).
(MUST LIST AT LEAST ONE DIRECTOR BELOW)

NAME DONALD DICK JR.

STREET 28 LOON LANE

CITY/STATE/ZIP CHILMARK, MA 02535

NAME EMANUELLE COSTA

STREET VIA MAZZINI PARAGRAPH 2B

CITY/STATE/ZIP 6900 LUGANO, SWITZERLAND

NAME

STREET

CITY/STATE/ZIP

NAME

STREET

CITY/STATE/ZIP

To be signed by an officer, director, or any other person authorized by the board of directors.

I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

David C. Ballard

Please print name and title of signer: DAVID C. BALLARD, PRESIDENT

NAME

TITLE

FEE DUE: \$100.00

E-MAIL ADDRESS (OPTIONAL):



WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529